	Under the Panen	work Reduction Act	of 1995 no ne	יינגטאג ארש ויינו	U. S. P.	Apparent and Trade	proved for use the mark Office; U.S	rough I 5. DEP/	PTO. 0/31/2002. C URTMENT O UVALID OMB.	/SB/06 (08-00) MB 0651-0032 F COMMERCE
PTO/SB/06 (08-00 Approved for use through 10/31/2002, OMB 0551-003. U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERC Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD PAGE 10-10-10-10-10-10-10-10-10-10-10-10-10-1										
CLAIMS AS FILED - PART ((Column 1) (Column 2)							L ENTITY	OR	OTHER T	THAN
FOR		NUMB	NUMBER FILED		NUMBER EXTRA		E FEE]	RATE	FEE
	SIC FEE						\$	OR		s 7/000
(37	CFR 1.16(c))	A IA49		ıs 20 • • 0		x \$	=	OR	x \$ =	
(37	CFR 1.16(b))	DENT CLAIM PR		OCFR 1.16(d))				OR	X .* .*	
				TOTA	L	OR OR	TOTAL	7000		
If the difference in column 1 is less then zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							L ENTITY	OR	OTHER T	
AMENDMENT A	30	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	ER PRESENT SLY EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	= 0	x \$	= 0	OR OR	x \$=	
	Independent (37 CFR 1.16(b))	•	Minus	***	= 0	x	= 0		×	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (97 CFR 1.14(d))						. =	OR	+=	
(Column 1) (Column 2) (Column 3)						TOTA ADDIT. FEI		OR	TOTAL DDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R PRESENT SLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	+	Minus	**	=	x s	=	OR OR	× \$=	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	x	=	OR	x=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.1649))						= .	OR	+=	
(Column 1) (Column 2) (Column 3)						ADDIT. FE		ORA	TOTAL DDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R PRESENT SLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$	=	OR OR	x \$ ≈	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	=	OR	x ≈	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR), 14(d))						=	OR	+ =	·
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".										

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will depending upon the needs of the individual case.

Any comments on the amount of time you are required to complete this form should be sent to the Chief information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.